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MAY 21 2009

IDWR/North

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE COEUR D'ALENE-SPOKANE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 49576

Ident. Number 95-10492
Date Received: 5/7/2009
Receipt No: NO 20665
Received By: cm

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day**

1. Name of Claimant(s)

DOUGLAS ALBERT Phone: (208) 762-4642
7203 E OHIO MATCH RD
HAYDEN ID USA 83835

OR

MICHELLE ALBERT Phone: (208) 762-4642
7203 E OHIO MATCH RD
HAYDEN ID USA 83835

2. Date of Priority: 04/05/2006

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
52N	03W	21	NW NE	KOOTENAI	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
STOCKWATER	01/01	12/31	0.02	
DOMESTIC	01/01	12/31	0.04	

7. Total Quantity Appropriated is:

0.06 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4 Lot	Use	Acres
52N	03W	21	NW NE	DOMESTIC	
			NW NE	STOCKWATER	

11. Place of use in counties: KOOTENAI

12. Do you own the property listed above as place of use? Yes

13. Other Water Rights Used:

14. Remarks:

PARCEL NUMBER 0-5447-001-002-0

15. Basis of Claim: Beneficial Use

16. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the COEUR D'ALENE-SPOKANE River Basin Adjudication." (b.) I/We do _____ do not X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: ONE

For Individuals:

I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): Michelle Clout Date: 5/2/09

Date: _____

WELL DRILLER'S REPORT

Office Use Only			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
1/4 _____		1/4 _____	1/4 _____
Lat: _____	_____	Long: _____	_____

1. WELL TAG NO. D0040889

Drilling Permit No: _____

Other IDWR No. _____

2. OWNER

Name ALBERT, DOUG

Well Number:

1137

Address 2795 HAYDEN AVE.

City HAYDEN State ID Zip 83835

3. LOCATION OF WELL by legal description

sketch map location must agree with written location

N		Twp. 52N ☒ North or ☐ South	
W		Rge. 3W ☐ East or ☒ West	
E		Sec. 21 <u>1/4 NE 1/4 NE 1/4</u>	
S		Gov't Lot _____ County <u>KOOTENAI</u>	
		Lat: _____ Long: _____	

Address of Well Site OHIO MATCH

City HAYDEN

(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Bk. _____ Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation

☐ Thermal ☐ Injection ☐ Other _____

5. TYPE OF WORK check all that apply (Replacement, etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK		AMOUNT		METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	40	450 LBS	POURED

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 135

Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner Welded	Threaded
6	+1	135	.250	STEEL	☒	☐	☒
4	-2	472	.200	PVC	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method SKILL SAW

☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
442	472	1/8 X6	60	4	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

182 ft. below ground Artesian pressure _____ lb.

Depth flow encounter 470 ft. Describe access port or control devices: _____

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
50			1 HR

Water Temp. COLD Bottom Hole Temp COLD

Water Quality test or comments: GOOD

Depth first Water encountered 260

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

				Water	
Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Y	N
8	0	36	Brown Clay & Shale	☐	☒
8	36	41	Brown & Tan Shale	☐	☒
8	41	60	Brown Clay	☐	☒
8	60	112	Brown Clay & Sand	☐	☒
8	112	130	Blue Clay	☐	☒
8	130	135	Brown & Red Shale	☐	☒
6	135	156	Blue Clay	☐	☒
6	156	190	Brown Shale w/ Clay Seams	☐	☒
6	190	222	Brown & Red Soft Shale	☐	☒
6	222	244	Brown & Tan Shale	☐	☒
6	244	260	Gray & Black Shale	☐	☒
6	260	315	Blue & White Fractured Shale	☒	☐
6	315	340	Green & Black Shale	☐	☒
6	340	460	Gray Shale	☐	☒
6	460	475	Gray & Black Fractured Shale	☒	☐

Completed Depth 472 (Measurable)

Date: Started 3/30/2006 Completed 4/5/2006

13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name H2O Well Service, Inc. Firm No. 448

Firm Official Steve R. Kohn Date 4-11-06

and

Supervisor or Operator Bob Kern Date 4/6/06

BOB KERN

(Sign Once if Firm Official and Operator)

ENCLOSURE

POU

WELL

